

MANUKAU VETERANS CYCLING CLUB INC (the "Club")

ANNUAL SUBSCRIPTION 2023

Name: Date of Birth:.....
 Address.....
 Car Registration:..... Phone Home:.....
 Occupation:..... Phone Mobile:.....
 E-mail:
 Emergency Contact: Phone:
 Member Since..... E-mail newsletter: Yes No

All information supplied will be included in the Club membership list and circulated to financial members.

INDEMNITY DECLARATION

In consideration of the acceptance of my membership I hereby for myself, executors, administrators and assignees indemnify and release the Club and all persons involved in the conduct of the Club from all claims of damages or actions whatsoever in any manner arising out of my participation in the Club and Club Events.

I acknowledge that I am fully aware of the risks involved in participating in Club Events, Rides & Activities. I further undertake that I am sufficiently fit to ride in Club events & rides safely and that my bicycle and other equipment used in Club events & rides will be in good working order and condition. I have read and agree to abide by the club's code of conduct and safety rules at <https://cycleclub.co.nz/conduct/> I agree that the Committee's decision is final.

Tick here if wish to volunteer for **Ride Manager Duty** for the coming year.

PRIVACY ACT

I consent to the above details being collected by the Club for the purpose of compiling the Club's membership records and disclosing those details to any sponsor of the Club and to all other Club Members. I acknowledge that under the Privacy Act 1993 I have the right of access to and correction of my personal information held by the Club.

I have paid my subscription of \$ 30 (\$ 25 if 70+ years old) into bank account **12-3233-0499889-00**
 Please complete and return this form to **manukavets@gmail.com**

Signature: Date:

You can print and laminate the below to carry with you as ID when out riding.

<div style="display: flex; align-items: center;"> <div> <p>Manukau Veterans Cycle Club Membership Card</p> </div> </div> <p>Name: 2</p> <p>Address: 0</p> <p>..... 2</p> <p>..... 3</p> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin-top: 10px;"> Expiry 31/03/24 </div>	<div style="display: flex; align-items: center;"> <div> <p>Emergency Contact:</p> </div> </div> <p>Name:</p> <p>Phone:</p> <p>Allergies or Known Medical Conditions:</p> <p>.....</p> <p>.....</p>
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